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SENATOR KELLY: No, that is not true. This is to specifically show the minimums that would be covered. Everything else is covered also.

SENATOR CAVANAUGH: No. Let's say, you've got a major medical policy that the parents carry. Now all that this law would require, under Section 2, is that included in there would be coverage for the infant for congenital and birth defects, from the moment of birth? But they could write . . . for example, another exclusion in there that says any other illness or sickness caused for any other reason other than congenital birth defect would not be covered for a period of 90 days? Could they still do that under this provision?

SENATOR KELLY: That certainly is not my understanding of this provision at all. We are attempting to write that the children will be covered at birth and forward for health, accident, sickness. If there's any question about these specific items of whether they happened before birth, or what happened, it is specifically set out in this instance to be covered.

SENATOR CAVANAUGH: OK. Your intent would be that they should mandatorily be required to cover even such a thing as if the child developed a cold in the 10th or 5th day after birth, and no relationship to a birth defect or whatever, that kind of illness should be covered also, mandatorily.

SENATOR KELLY: That's correct.

SENATOR CAVANAUGH: OK. I'm not sure that your language does that, but if that's your intent, that's fine. I would say that we should pursue maybe what the language says. I think it may be exclusive to birth defects, as it reads. Otherwise . . . thanks Senator Kelly. I would support the bill. I would just note that perhaps that language needs to be worked on.

SPEAKER: Chair recognizes Senator Marsh.

SENATOR MARSH: Mr. Speaker, this . . . I'd like to clarify a point for Senator Dworak. Some health and accident policies, which are family type policies, cover children without an additional premium. On the other hand, there are some policies which have a specific premium for each child covered. This piece of legislation will cover both. If it is an insurance company which charges an additional premium, the family will have to make the report so that child will continue to be covered after 31 days. In the meantime, if you have a premature infant and a wife who is ill you have 31 days grace to get that information to the insurance company so they can start charging you an additional premium. You do not have to have this if you choose to take out a health insurance policy which does not cover families, then the infant is not covered. This is only where there is a family maternity type benefits policy, so that the newborn infant will be covered from the moment of birth.